

Polly Order Form for Dealers

Effective Date: _____

| | |
|---|----------------|
| Dealer (Legal Entity): | |
| Dealership DBA Name: | |
| If multiple entities and dealerships will be covered by this Order Form, add the group name and main mailing address below and list the entities and dealerships in <u>Attachment 1</u> to this Order Form. | |
| Street: | Contact Name: |
| City: | Contact Email: |
| State: Zip: | Contact Phone: |
| F&I Provider authorized by Dealer to support Dealer in use of Polly for Dealers: Assurant | |

| | |
|--|---|
| Licensor: Polly Insurance Agency, LLC (fka Winooski, LLC) | |
| Street: 2300 Saint George Road | Contact Name: Debby Marek |
| City: Williston | Contact Email: Contracts@polly.co |
| State: VT Zip: 05495 | Contact Phone: 802-316-3952 |

License and Referral Fees

License Fees: \$0.00

Optional User Referral Fees:

User Fees: Twenty-five dollars (\$25) payable to the Authorized User for each completed Qualified Connection.

- Other Qualifying Activities may be selected by Licensor in consultation with Dealer to maximize Dealership’s success, and Dealer will be provided advance notice.

_____ **Initial here** to accept and enroll in the option to provide the \$25 referral fee to Authorized Users as outlined above.

Dealer Fees:

Should Dealer complete a Qualified Initial Rate for twenty-five (25) or more unique Dealer customers for any calendar month, Licensor will pay Dealer Fees to the Dealer equal to twenty-five dollars (\$25) for each Qualified Connection completed during such month.

To qualify for any Dealer Fees, Dealer shall provide to Licensor, by the 10th calendar day of each month, the number of its total motor vehicle sales and leases for the previous month, as described in Section 4.7.

Delivery of Sales Data:

Automated Method to be used to deliver sales data: _____ (Note: If this field is left blank, Dealer agrees to use Licensor’s current automated third-party service.)

Total motor vehicle sales and leases for previous month: Month: _____ Total: _____ (month and number are required fields). If multiple dealerships are listed in Attachment 1, enter Month here and Total sales for the prior month for each dealership in Attachment 1.

Additional Services: Initial those that apply and indicate current provider in the space below. Not all Services are currently available from all providers.

_____ Polly Link on Dealer Website(s) (the “**Website Polly Link**”). Current website provider: _____

_____ Polly Link in Dealer’s F&I Menu(s) (the “**F&I Menu Polly Link**”). Current F&I menu provider: _____

_____ Automated emails and texts to Dealer customers (the “**Messaging Service**”) (if available in Dealer’s location)

(Capitalized terms above, not otherwise defined, are defined in the Terms and Conditions)

Terms and Conditions – PLEASE READ CAREFULLY

By signing this Order Form, Dealer expressly acknowledges and agrees to be bound by the terms and conditions of this Order Form and the [Polly Dealer Terms and Conditions](https://www.polly.co/hubfs/Legal/Polly_Dealer_Terms_and_Conditions.pdf) found at https://www.polly.co/hubfs/Legal/Polly_Dealer_Terms_and_Conditions.pdf, which can also be obtained from the Licensor Contact Name identified above (the “Terms and Conditions”). The person signing this Order Form represents and warrants that the person has the authority to bind Dealer and agrees that this Agreement may be electronically signed.

| | |
|------------------------------------|---------------|
| Polly Insurance Agency, LLC | Dealer |
| Signature: | Signature: |
| Name: | Name: |
| Title: | Title: |

Attachment 1 to Dealer Order Form

Entity and Dealership Information

The list below represents all the entities and dealerships covered under this Agreement. The addition or removal of entities and dealerships will be reflected in a bilateral modification to this Agreement.

| # | Legal Entity Name, Address, State of Registration | Dealership Name | Dealership Address | Dealership POC and Phone Number | Sales Prior Month |
|----|---|-----------------|--------------------|---------------------------------|-------------------|
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |
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| 6 | | | | | |
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| 14 | | | | | |
| 15 | | | | | |